

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

10/018868

FILED DATE
17 MAR 2002

APPLICANT(S)

Devic

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1							51					
2							52					
3							53					
4							54					
5							55					
6							56					
7							57					
8							58					
9							59					
10							60					
11							61					
12							62					
13							63					
14							64					
15			/				65					
16				/			66					
17				/			67					
18				/			68					
19				/			69					
20				/			70					
21				/			71					
22				/			72					
23				/			73					
24				/			74					
25				/			75					
26				/			76					
27				/			77					
28				/			78					
29				/			79					
30				/			80					
31				/			81					
32			/				82					
33				/			83					
34				/			84					
35				/			85					
36				/			86					
37				/			87					
38				/			88					
39				/			89					
40				/			90					
41				/			91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.			2				TOTAL IND.					
TOTAL DEP.			25				TOTAL DEP.					
TOTAL CLAIMS			27				TOTAL CLAIMS					